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PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/004,113
		Filing Date	October 23, 2001
		First Named Inventor	David W. MORRIS
		Art Unit	1642
		Examiner Name	A. Harris
Total Number of Pages in This Submission	4	Attorney Docket Number	529452000125

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	1. Request for Withdrawal as Attorney or Agent and Change of Correspondence Address (in triplicate) - 3 pages
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	2. Return Receipt Postcard
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Remarks	
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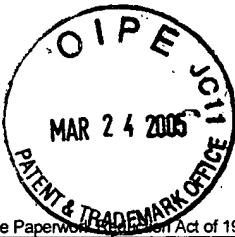
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	MORRISON & FOERSTER LLP (Customer No. 25226)		
Signature			
Printed name	Gladys H. Monroy		
Date	March 21, 2005	Reg. No.	32,430

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Dated: March 21, 2005

Signature: (Martina Placid)



PTO/SB/83 (09-04)

Approved for use through 11/30/2005. OMB 0651-0035

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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/004,113
	Filing Date	October 23, 2001
	First Named Inventor	David W. MORRIS
	Art Unit	1642
	Examiner Name	A. Harris
	Attorney Docket Number	529452000125

Commissioner for Patents

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Please withdraw me as attorney or agent for the above identified patent application, and

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 the attorneys/agents (with registration numbers) listed on the attached paper(s), or
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The reasons for this request are:

This request is being made at the request of Sagres Discovery, Inc.

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OR

Firm or Individual Name Gwilym Attwell (Cozen O'Connor)

Address	1900 Market Street		
City	Philadelphia	State	Pennsylvania
Country			
Telephone			Fax
Signature	<i>Gladys Monroe</i>		
Name	Gladys H. Monroe	Registration No.	32,430
Date	March 21, 2005	Telephone No.	(650) 813-5711

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Dated: March 21, 2005

Signature: *Martina Placid* (Martina Placid)



PTO/SB/83 (09-04)

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OR

<input checked="" type="checkbox"/> Firm or Individual Name	Gwilym Attwell (Cozen O'Connor)			
Address	1900 Market Street			
City	Philadelphia	State	Pennsylvania	Zip 19103
Country				
Telephone			Fax	
Signature				
Name	Gladys H. Monroe	Registration No.	32,430	
Date	March 21, 2005	Telephone No.	(650) 813-5711	

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**REQUEST FOR WITHDRAWAL
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AND CHANGE OF
CORRESPONDENCE ADDRESS**

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